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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/573,944			ing Date 14/2007	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN ALL ENTITY
FOR			UMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		l	N/A	
	EXAMINATION FE (37 CFR 1 16(o), (p),		N/A		N/A		N/A		l	N/A	
TO' (37	TAL CLAIMS CFR 1.16(i))		minus 20 = *			1	x \$ = 1		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	1S	minus 3 = *			1	x \$ =		1	X S =	
APPLICATION SIZE FEE If the specification and drawings exceed sheets of paper, the application size fee is \$250 (\$125 for small entity) for each additional 50 sheets of fraction thereof \$3 U.S.C. 41(a)(1)(G) and 37 GFR 1.16(on size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	L
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	12/20/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 33	Minus	33	= 0		X \$30 =	0	OR	X \$ =	
	Independent (37 CFR 1.16(h))	· 3	Minus	3	- 0		X \$125 =	0	OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	•	Minus		=		X \$ =		OR	x s =	
№	Independent (37 CFR 1 16(h))	*	Minus	***	-	l	x s =		OR	x s =	
Ę.	Application Size Fee (37 CFR 1.16(s))					l					
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
									OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". If the "Highest Number Previously Paid For IN THIS SPACE is less than 2, enter "30". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN Tall SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less than 3, enter "3". The "Highest Number Previously Paid For IN SPACE is less tha											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPT To to proceed) an application of the completion of the completi ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.